

APPLICATION FOR AUTHORIZATION TO CONTINUE LIEN SALE AFTER UNSUCCESSFUL SERVICE

LIEN SALE UNIT
 P.O. BOX 932317
 SACRAMENTO, CA 94232-3170

I am applying for a continuation of my lien sale because my attempt(s) to effect court service to the person at the address provided on the Declaration of Opposition was unsuccessful. If I, the lienholder, am unable to effect service, the California Civil Code, Vehicle Code and Harbors and Navigation Code require the department to authorize a lien sale.

VEHICLE OR VESSEL DESCRIPTION	LICENSE PLATE NUMBER/CF NUMBER		VEHICLE IDENTIFICATION NUMBER (VIN)		STATE REGISTERED
	MAKE/BUILDER	YEAR MODEL	MODEL/VESSEL TYPE	VESSEL LENGTH	ENGINE NUMBER (MOTORCYCLE ONLY)
AUTHORITY TO CONDUCT LIEN SALE (CHECK ONE)	My lien sale will be conducted under the process for: <input type="checkbox"/> Vehicle valued over \$4000 or from a self-service storage facility (Civil Code §3071) <input type="checkbox"/> Vehicle valued \$4000 or less (Civil Code §3072) <input type="checkbox"/> Public agency impound valued at \$300 or less (Vehicle Code §22851.8) <input type="checkbox"/> Vessel valued over \$1500 (Harbors and Navigation Code §503)*				
NAME/ADDRESS WHERE COURT SERVICE ATTEMPTED	PRINTED NAME				
	STREET ADDRESS				
	CITY		STATE	ZIP CODE	
TYPE OF SERVICE ATTEMPTED (CHECK ONE)	<input type="checkbox"/> Service attempted by certified mail. Postal receipts or postal listing sheets are attached. <i>*Harbor and Navigation Code requires mail service only for vessels.</i> <input type="checkbox"/> Service attempted in person. <i>The Civil Code requires service in person to be performed by a marshal, sheriff or licensed process service server.</i>				
CERTIFICATION	LIENHOLDERS NAME (PRINT)			TELEPHONE NUMBER ()	
	STREET ADDRESS				
	CITY		STATE	ZIP CODE	
	AGENT ACTING FOR LIENHOLDER (PRINT NAME)		REGISTRATION SERVICE NO.	TELEPHONE NUMBER ()	
	STREET ADDRESS				
	CITY		STATE	ZIP CODE	
	<i>I certify under penalty of perjury under the laws of the State of California that the information provided is true and correct.</i>				
DATE		SIGNATURE OF LIENHOLDER OR AGENT ACTING FOR LIENHOLDER X			
MAIL DOCUMENTS TO	Please include this form with a copy of the court documents (<i>if service was attempted in person</i>) or the unopened certified mail (<i>if service was attempted by mail</i>) and return it: <div style="text-align: right;"> Department of Motor Vehicles Lien Sale Section P.O. Box 932317 Sacramento, CA 94232-3170 </div>				